PTO/SB/06 (08-00)
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o a collection of information unless it displays a valid OMB control number Under the Paperwork Reduction Act of 1995, no persons are required to respond Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD AND1P550 (60021/355001) OTHER THAN **CLAIMS AS FILED - PART I SMALL ENTITY** OR SMALL ENTITY (Column 2) (Column 1) FOR **NUMBER FILED NUMBER EXTRA** RATE FEE RATE FEE MAR 0 5 2002 BASIC FEE \$ OR ar crì TOTAL CLAIMS minus 20 = OR INDEPENDENT CLAIMS minus 3 = OR = (37 CFR 1.16(b)) **MULTIPLE DEPENDENT CLAIM PRESENT** (37 CFR 1.16(d)) OR = TOTAL OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II** OTHER THAN **SMALL ENTITY** OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL RATE TIONAL RATE AMENDMENT AFTER **PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR OR · Total ** Minus s 18 = \$234 20 13 (37 CFR 1.16(c)) 33 OR Independent *** 84 _ Minus \$252 6 3 (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 OR TOTAL TOTAL \$486 OR ADDIT. FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-AMENDMENT B REMAINING **PRESENT** NUMBER RATE TIONAL TIONAL RATE AFTER **PREVIOUSLY EXTRA** FEE FEE **AMENDMENT PAID FOR** OR Total ** Minus = (37 CFR 1.16(c)) OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR **ADDIT. FEE** ADDIT. FEE (Column 1) (Column 2) (Column 3) ADDI-ADDI-RATE TIONAL TIONAL RATE

FEE

TOTAL

ADDIT. FEE

OR OR OR OR

OR

TOTAL

ADDIT. FEE

FEE

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus	**	=
	Independent (37 CFR 1.16(b))	•	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))				

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.